



**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, ASB TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL: 587-0460 FAX: 587-0470  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME (Last)	(First)	(Middle)	TELEPHONE
Kusunoki,	Susan	A.	808-536-5688
MAILING ADDRESS (Street)			FAX
84 N. King Street			808-536-5720
(City)	(State)	(Zip Code)	
Honolulu,	HI	96817	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Pacific Management Consultants, Inc.			808-536-5688
MAILING ADDRESS (Street)			FAX
84 N. King Street			808-536-5720
(City)	(State)	(Zip Code)	
Honolulu,	HI	96817	

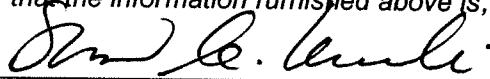
<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Guy Carpenter & Company, Inc.		
MAILING ADDRESS (Street)		FAX
One Convention Center, 701 Pike Street, Suite 2000		
(City)	(State)	(Zip Code)
Seattle	WA	98101
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
MAILING ADDRESS (Street)		FAX
(City)	(State)	(Zip Code)

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Education                      | <input type="checkbox"/> Human Services  | <input type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities        | <input type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                       |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce           | <input type="checkbox"/> Hawaiian Affairs               | <input type="checkbox"/> Labor & Employment  | <input type="checkbox"/> Transportation                             |
| <input type="checkbox"/> Culture, Arts, Historic Preservation                | <input type="checkbox"/> Health                         | <input type="checkbox"/> Planning, Land & Water Use Management                         | <input type="checkbox"/> Other: (indicate below)                    |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing                        | <input type="checkbox"/> Public Safety & Corrections                                   | _____   |

**PART IV CERTIFICATION OF LOBBYIST**

*I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.*



(Signature of Lobbyist)

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
------	--

Paul Picardo

NAME OF ORGANIZATION (if applicable)

Guy Carpenter & Company, Inc.

TELEPHONE

MAILING ADDRESS (Street)

One Convention Center, 701 Pike Street, Suite 2000

FAX

(City)

(State)

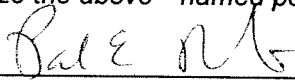
(Zip Code)

Seattle

WA

98101

*I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.*



(Signature of Authorizing Officer or Person Represented)

1/16/06

(Date)